

PTO/SB/82 (09-03) Approved for use through 11/30/2005. OMB 0851-0035 and Trademark Office: U.S. DEPARTMENT OF COMMERCE f information unless it displays a valid OMB control number

REVOOSTION OF POWER OF **ATTORNEY WITH NEW POWER OF ATTORNEY** AND **CHANGE OF CORRESPONDENCE ADDRESS**

Application Number	10/733,042					
Filing Date	December 11, 2003					
First Named Inventor	Robert D. Ivarie					
Art Unit	1645					
Examiner Name	To be assigned					
Attorney Docket Number	AVI-028					

I hereby revoke all previous powers of attorney given in the above-identified application.									
A Power of Attorney is submitted herewith.									
OR X I hereby appoint the practitioners associated with the Customer Number: 26,739									
Please change the correspondence address for the above-identified application to:									
X The add		associated with 26,739 umber:							
OR									
Firm <i>or</i> Individual Na	me								
Address									
Address									,
City					State			Zip	
Country									
Telephone					Fax				
I am the: X Partial Assignee. See 37 CFR 3.71									
Assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)									
SIGNATURE of Applicant or Assignee of Record									
Name	Judy	Curry (for th	e Univer	sity of	Georg	ia Res	earch l	Found	ation, Inc.)
Signature	1	de Cun	$\overline{\sim}$						
Date	Øckot	er 022, 2004	0		Telephor	ie 70)6-542-	5944	
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.									
X *Total of	L	_ forms are submitted.							

This collection of Information is required by 37 CFR 1.36. The information is required to obtain or retain a benefit by the public which is to file (and by to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

Back to Almal 11/30/04